

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

KeyCorp Advocates Fund

ADDRESS (number and street)

127 Public Square

OH-01-27-1816

☐Check if different
than previously
reported. (ACC)

Cleveland

OH

44114

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00073155

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☒

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2008

through

01

31

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Erskine E. Cade

Signature of Treasurer

Electronically Filed by Erskine E. Cade

Date

02

14

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
KeyCorp Advocates Fund

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	1	3	1	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		31295.11
(b) Cash on Hand at Beginning of Reporting Period	31295.11	
(c) Total Receipts (from Line 19)	17194.51	17194.51
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	48489.62	48489.62
7. Total Disbursements (from Line 31)	10103.50	10103.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	38386.12	38386.12
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name
KeyCorp Advocates Fund

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	17194.51	17194.51
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	17194.51	17194.51
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ➤	17194.51	17194.51
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	17194.51	17194.51
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	17194.51	17194.51

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	3.50	3.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	3.50	3.50
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	2500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	7600.00	7600.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	10103.50	10103.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10103.50	10103.50

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	17194.51	17194.51
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17194.51	17194.51
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3.50	3.50
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3.50	3.50

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 12

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

A.

Full Name (Last, First, Middle Initial)
Steve Austria for Congress

Mailing Address Cindy Barnett, Treasurer
100 E. Broad Street, Suite 2330

City Columbus State OH Zip Code 43215

Purpose of Disbursement

011
Category/
Type

Candidate Name
Steve Austria

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 07

Transaction ID: 6453428

Date of Disbursement

01 / 17 / 2008

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
Stivers for Congress

Mailing Address 372 W. 2nd Avenue

City Columbus State OH Zip Code 43201

Purpose of Disbursement

011
Category/
Type

Candidate Name
Steve Stivers

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 15

Transaction ID: 6472071

Date of Disbursement

01 / 25 / 2008

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)
Steve Austria for Congress

Mailing Address Cindy Barnett, Treasurer
100 E. Broad Street, Suite 2330

City Columbus State OH Zip Code 43215

Purpose of Disbursement

011
Category/
Type

Candidate Name
Steve Austria

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 07

Transaction ID: 6472070

Date of Disbursement

01 / 25 / 2008

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

KeyCorp Advocates Fund

A.

Full Name (Last, First, Middle Initial)

Driehaus For Congress

Mailing Address 1018 Benz Avenue

City
Cincinnati

State
OH

Zip Code
45238

Purpose of Disbursement

Candidate Name

Mr. Steven Driehaus

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

State: OH

District: 01

Transaction ID: 6472440

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

2500.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

A. Full Name (Last, First, Middle Initial)
Batchelder for Representative Committee

Mailing Address H. C. Davis, Treasurer
22 Parkview Drive

City Medina State OH Zip Code 44256

Purpose of Disbursement
William Batchelder, STATE HOUSE 69 OH

Candidate Name
William Batchelder

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼
State: OH District: 69

Transaction ID: 6451124

Date of Disbursement

01 / 11 / 2008

Amount of Each Disbursement this Period

500.00

William Batchelder, STATE
HOUSE 69 OH

B. Full Name (Last, First, Middle Initial)
Finkbeiner Committee

Mailing Address Mike White, Treasurer
1817 Madison Avenue

City Toledo State OH Zip Code 43604

Purpose of Disbursement
Carleton Finkbeiner, MAYOR OH

Candidate Name
Carleton Finkbeiner

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2009 ☒ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: 6453498

Date of Disbursement

01 / 17 / 2008

Amount of Each Disbursement this Period

1000.00

Carleton Finkbeiner, MAYOR
OH

C. Full Name (Last, First, Middle Initial)
Danny Bubp for State Representative Committee

Mailing Address Wendell Rickey, Treasurer
18877 St. Rt. 136

City Winchester State OH Zip Code 45697

Purpose of Disbursement
Danny Bubp, STATE HOUSE 88 OH

Candidate Name
Danny Bubp

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼
State: OH District: 88

Transaction ID: 6453483

Date of Disbursement

01 / 17 / 2008

Amount of Each Disbursement this Period

500.00

Danny Bubp, STATE HOUSE
88 OH

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

A. Full Name (Last, First, Middle Initial) Friends of Shirley Smith	Transaction ID: 6453478 Date of Disbursement
Mailing Address Karen Evans, Treasurer 13901 Woodworth Road	<input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/>
City Cleveland State OH Zip Code 44112	Amount of Each Disbursement this Period
Purpose of Disbursement Shirley Smith, STATE SENATE 21 OH	<input type="text" value="300.00"/>
Candidate Name OH Sen. Shirley Smith	<input type="text" value="011"/> Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District:	Shirley Smith, STATE SENA- TE 21 OH
B. Full Name (Last, First, Middle Initial) Mecklenborg for State Representative	Transaction ID: 6455255 Date of Disbursement
Mailing Address James Krause, Treasurer 6648 Pownerfarm Drive	<input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/>
City Cincinnati State OH Zip Code 45248	Amount of Each Disbursement this Period
Purpose of Disbursement Robert Mecklenborg, STATE HOUSE 30 OH	<input type="text" value="250.00"/>
Candidate Name Mr. Robert Mecklenborg	<input type="text" value="011"/> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 30	Robert Mecklenborg, STATE HOUSE 30 OH
C. Full Name (Last, First, Middle Initial) Citizens with Celeste	Transaction ID: 6466653 Date of Disbursement
Mailing Address H. Ritchey Hollenbaugh, Treasurer 366 E. Broad Street	<input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/>
City Columbus State OH Zip Code 43215	Amount of Each Disbursement this Period
Purpose of Disbursement Ted Celeste, STATE HOUSE 24 OH	<input type="text" value="500.00"/>
Candidate Name OH Rep. Ted Celeste	<input type="text" value="011"/> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 24	Ted Celeste, STATE HOUSE 24 OH

SUBTOTAL of Disbursements This Page (optional)

1050.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund**A.** Full Name (Last, First, Middle Initial)
Republican Party of Cuyahoga CountyMailing Address 1500 W. 3rd Street, Suite 120
The MK Ferguson Building

City Cleveland State OH Zip Code 44113

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 6466726

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	5		2	0	0	8

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Friends of Nan BakerMailing Address Mark Getsay, Treasurer
29761 Devonshire Oval

City Westlake State OH Zip Code 44145

Purpose of Disbursement
Nan Baker, STATE HOUSE 16th OHCandidate Name
Ms. Nan BakerOffice Sought: ☒ House
☐ Senate
☐ President

State: OH District: 16

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 6466705

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	5		2	0	0	8

Amount of Each Disbursement this Period

500.00

Nan Baker, STATE HOUSE 16th OH

C. Full Name (Last, First, Middle Initial)
Committee for Cindy Lazarus for Franklin County CommissionerMailing Address Alex Shumate, Treasurer
41 South High Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Cindy Lazarus, LOCAL OHCandidate Name
Ms. Cindy LazarusOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 6466724

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	5		2	0	0	8

Amount of Each Disbursement this Period

1000.00

Cindy Lazarus, LOCAL OH

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 / 12

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

KeyCorp Advocates Fund

A. Full Name (Last, First, Middle Initial)
Driehaus for State Representative

Mailing Address Kim Gilday-Weber, Treasurer
4990 Relleum Avenue

City Cincinnati State OH Zip Code 45238

Purpose of Disbursement
Denise Driehaus, STATE HOUSE 31 OH

Candidate Name
Ms. Denise Driehaus

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 31

Transaction ID: 6466725

Date of Disbursement

01 / 25 / 2008

Amount of Each Disbursement this Period

250.00

Denise Driehaus, STATE HO-
USE 31 OH

B. Full Name (Last, First, Middle Initial)
Citizens for Amstutz

Mailing Address Dale Long, Treasurer
172 South Sunset Drive

City Orrville State OH Zip Code 44667

Purpose of Disbursement
Ron Amstutz, STATE HOUSE 3rd OH

Candidate Name
Mr. Ron Amstutz

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 03

Transaction ID: 6466729

Date of Disbursement

01 / 25 / 2008

Amount of Each Disbursement this Period

500.00

Ron Amstutz, STATE HOUSE
3rd OH

C. Full Name (Last, First, Middle Initial)
Ohio House Democratic Caucus Fund

Mailing Address Otto Beatty Jr., Treasurer
271 E. State Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 6475428

Date of Disbursement

01 / 30 / 2008

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 / 12

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund**A.**Full Name (Last, First, Middle Initial)
Committee to Elect David GoodmanMailing Address Ben Kanzeg, Treasurer
1908 Cedar Willow Drive

City Columbus State OH Zip Code 43229

Purpose of Disbursement
David Goodman, STATE SENATE 3rd OHCandidate Name
David Goodman011
Category/
TypeOffice Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2010 ☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District:

Transaction ID: 6475383

Date of Disbursement

M M / D D / Y Y Y Y
0 1 / 3 0 / 2 0 0 8

Amount of Each Disbursement this Period

300.00

David Goodman, STATE SENA-
TE 3rd OH**B.**Full Name (Last, First, Middle Initial)
Ohio Democratic PartyMailing Address Chris Redfern, Treasurer
271 East State Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement

Candidate Name

011
Category/
TypeOffice Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 6475449

Date of Disbursement

M M / D D / Y Y Y Y
0 1 / 3 0 / 2 0 0 8

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

800.00

TOTAL This Period (last page this line number only)

7600.00